

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	T A	IC 844	12/27/00
RESPONSE FORMALITY REVIEW	W	907	6-26-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	
1	✓ 1/6/3
2	✓ 1/11/3
3	✓ 1/12/19/4
4	✓
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Claim	Date
Final Original	
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Claim	Date
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REF AVAILABLE COPY

If more than 150 claims or 10 actions staple additional sheet here

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